

**FILE ON OR BEFORE APRIL 7, 1999 TO AVOID
REVOCATION AND \$500 PENALTY FEE**

LIMITED PARTNERSHIP ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
---	---	--

FILED
99 MAR 29 AM 6:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



1. Name of Limited Partnership TOBY PROPERTY, LTD.	1a. DOCUMENT # A95000001324
--	--

Mailing Address % BURTON & CO., P.A. 4310 SHERIDAN ST., #202 HOLLYWOOD FL 33021	Principal Office Address % BURTON & CO., P.A. 4310 SHERIDAN ST., #202 HOLLYWOOD FL 33021
2. Mailing Address Suite, Apt. #, etc. City & State Zip Country	2a. Principal Office Address Suite, Apt. #, etc. City & State Zip Country

3. Date Formed or Registered 09/07/1995	5a. Capital Contributions as Shown on record \$1,100,990.00
3a. Date of Last Report 03/25/1998	
4. State or Country of Formation FL	5b. Amount of Capital Contributions in FLORIDA to date
6. FEI Number 65-0605161	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
7. Certificate of Status Desired	<input checked="" type="checkbox"/> \$8.75 Additional Fee Required
8. Make check payable to: Dept of State (See reverse side for fee information)	

9. Name and Address of Current Registered Agent WIENER, TOBY 19207 N.E. 18TH AVENUE, NORTH MIAMI BEACH FL 33179

10. If changed, new Registered Agent/Office Name Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt. #, etc. City Zip Code

10a. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment) _____ DATE _____

**A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY
MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.**

11. Name(s) of General Partner(s) TOBY PROPERTY, INC.	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 4310 SHERIDAN ST., #2	11b. City, State & Zip Code HOLLYWOOD FL 33021	11c. Registration Document Number P95000068678 FL 4-6-99
---	---	--	--

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE Toby Wiener DATE 3/20/99
 Typed or Printed Name of General Partner Signing Form Toby Wiener Daytime Telephone Number 954-961-1040

CR2E003 (12/98)